

471-000-411 Fee Schedule for Pediatric Feeding Clinics

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Information regarding Pediatric Feeding Clinic Services may be found in NAC 471, Chapter 18:

[http://www.sos.ne.gov/rules-and-](http://www.sos.ne.gov/rules-and-regs/regsearch/Rules/Health_and_Human_Services_System/Title-471/Chapter-18.pdf)

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It is the provider's responsibility to be aware of requirements for medical necessity, prior authorization, referral management, etc.

Nebraska Medicaid payment is the fee schedule allowable. Nebraska Medicaid payment is the lower of the fee schedule allowable or the provider's submitted charge. The provider's submitted charge must reflect their charge to the general public.

Procedure Code	Modifier	PA	Description	Medicaid Allowable
92526	U7	X	Pediatric feeding Disorder Clinic Intensive Day Treatment	\$729.84
92526	U8	X	Pediatric feeding Disorder Clinic Outpatient Therapy	\$147.33